

HCPCS*	Description	Status	Fee Screen
H1000	Maternal-ASSESSMENT IN OFFICE	A	\$66.86
*99402	Maternal-PROFESSIONAL VISIT OFFICE	A	\$64.03
*99402	Maternal-PROFESSIONAL VISIT IN HOME	A	\$88.05
H2000	Maternal-ASSESSMENT IN HOME	A	\$87.69
S9442	Maternal-CHILDBIRTH EDUCATION	A	\$32.02
A0110	Maternal-TRANSPORTATION BUS/VAN	A	\$21.20
A0100	Maternal-TRANSPORTATION TAXI	A	\$21.31
S0215	Maternal-TRANSPORTATION-VOLUNTEER	A	\$0.505
A0170	Maternal-TRANSPORTATION/OTHER	M	\$0.01
T1023	Maternal-SCREENING	A	\$20.00
H2000	Infant-ASSESSMENT IN HOME	A	\$97.69
*99402	Infant-PROFESSIONAL VISIT HOME	A	\$88.05
*99402	Infant-PROFESSIONAL VISIT	A	\$64.03
**96154	Infant-PROF. VISIT/DRUG EXPOSED	A	\$44.03
S9444	Infant-PARENTING EDUCATION	A	\$42.89
A0110	Infant-TRANSPORTATION BUS/VAN	A	\$21.20
A0100	Infant-TRANSPORTATION TAXI	A	\$21.31
S0215	Infant-TRANSPORTATION VOLUNTEER	A	\$0.505
A0170	Infant-TRANSPORTATION/OTHER	M	\$0.01

* The 99402 code is utilized for all MIHP visits occurring in the home, office or places other than the home. Home visits are reimbursed at a different rate than clinic visits. To receive appropriate reimbursement for visits, it is important that providers include the place of service when billing these codes. Reimbursement for visits will be determined by the place of service code entered on the claim. For purposes of billing, coverage is limited to a 30-minute visit.

**For code 96154, the HCPCS definition identifies one unit as being a 15-minute session. Current policy states that each infant visit must extend at least 30 minutes in duration to be a billable service. In order to receive full reimbursement for these services, the provider should bill for two units when using this code. Medicaid will reimburse for two units or a total of 30 minutes per code. For purposes of billing, coverage is limited to a 30-minute visit. Providers must bill this code as two units to receive the total visit fee of \$88.05.